SEP 2 6 2006

PTO/SB/22 (12-04)
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persons are required to respond to a collection of information unless if displays a valid OMB control number. **Docket Number (Optional)** PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 356882001200 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) **Application Number** 10/070,945 Filed March 13, 2002 VOICE ATTACHMENT CONTROL APPARATUS AND VOICE ATTACHMENT CONTROL METHOD FOR For CONSTRUCTION MACHINE Art Unit 2626 Examiner A. K. Azad This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): **Small Entity Fee** Fee One month (37 CFR 1.17(a)(1)) \$120 \$60 120.00 \$ Two months (37 CFR 1.17(a)(2)) \$450 \$225 \$ Three months (37 CFR 1.17(a)(3)) \$1020 \$510 \$ Four months (37 CFR 1.17(a)(4)) \$1590 \$795 \$ Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 \$ Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 September 26, 2006 Signature Date Deborah S. Gladstein (703) 760-7753 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted.

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FEE TRANSMITTAL FOR FY 2006 FOR FY 2006 First Named Inventor Hideto FURUTA Examiner Name A. K. Azad Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 120.00 Application Number 10/070,945 Filing Date March 13, 2002 First Named Inventor Hideto FURUTA Examiner Name A. K. Azad Art Unit 2626 Attorney Docket No. 356882001200 METHOD OF PAYMENT (check all that apply)
For FY 2006 First Named Inventor Hideto FURUTA Examiner Name A. K. Azad Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2626 TOTAL AMOUNT OF PAYMENT (\$) 120.00 Attorney Docket No. 356882001200
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 120.00 Examiner Name A. K. Azad Art Unit 2626 Attorney Docket No. 356882001200
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(1) Tables
METHOD OF PAYMENT (check all that apply)
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Check Credit Card Money Order Other (please identify): Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)
1. BASIC FILING, SEARCH, AND EXAMINATION FEES
FILING FEES SEARCH FEES EXAMINATION FEES
Small Entity Small Entity Small Entity Application Type Fee (\$)
Utility 300 150 500 250 200 100
Design 200 100 100 50 130 65
Plant 200 100 300 150 160 80
Reissue 300 150 500 250 600 300
Provisional 200 100 0 0 0 0
2. EXCESS CLAIM FEES Small Entit
Fee Description Fee (\$)
Each claim over 20 (including Reissues) 50 25
Each independent claim over 3 (including Reissues) 200 100
Multiple dependent claims 360 180
Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims
x = <u>Fee (\$)</u> <u>Fee Paid (\$)</u>
HP = highest number of total claims paid for, if greater than 20.
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)
× =
HP = highest number of independent claims paid for, if greater than 3.
3. APPLICATION SIZE FEE
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)
- 100 = /50 (round up to a whole number) x =
4. OTHER FEE(S) Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00
SUBMITTED BY
Signature Registration No. (Attorney/Agent) 43,636 Telephone (703) 760-7753
Name (Print/Type) Deborah S. Gladstein Date September 26, 2006